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Page 1 of 17

Date: April 26, 2007

<u>To:</u> Examiner Choudhury, Azizul Q	<u>Fax:</u> (571) 273-8300	<u>Art Unit:</u> 2145	
<u>From:</u> David P. McAbee Intel Corporation	<u>Fax:</u> (503) 264-1729	<u>Mailstop:</u> JF3-147	
<u>Subject:</u> 10/040,605	<u>Docket Number:</u> P13764	<u>Filing Date:</u> December 28, 2001	<u>Inventor:</u> Harriman et al.

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Derek S. Watson Date: April 26, 2007

Message:

Included in this Transmission:

- Facsimile Cover Sheet (1 page)
- Transmittal Form (1 page)
- Fee Transmittal (1 page submitted in duplicate)
- Response and Amendment to Office Action (13 pages)

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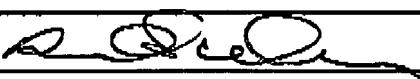
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TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	10/040,605	
		Filing Date	December 28, 2001	RECEIVED
		First-Named Inventor	Harriman, et al.	CENTRAL FAX CENTER
		Art Unit	2145	APR 26 2007
		Examiner Name	Choudhury, Azizul Q	
Total Number of Pages in This Submission	17	Attorney Docket Number	P13764	

ENCLOSURES <i>(Check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Fax Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Intel Corporation		
Signature	/David P. McAbee/Reg. No. 58,104/		
Printed name	David P. McAbee		
Date	April 26, 2007	Reg. No.	58,104

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Derek S. Watson	Date	04/26/2007

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application Number	10/040,605	RECEIVED
Filing Date	December 28, 2004	CENTRAL FAX CENTER
First Named Inventor	Harriman, et al.	
Examiner Name	Choudhury, Azizul Q	APR 26 2007
Art Unit	2145	
Attorney Docket No.	P13764	

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	Fee (\$)	Small Entity Fee (\$)
20	50	25
Each independent claim over 3 (including Reissues)	200	100

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =	x	=		Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fee Paid (\$)

SUBMITTED BY

Signature	/David P. McAbee/Reg. No. 58,104/	Registration No. (Attorney/Agent) 58,104	Telephone 503-712-4988
Name (Print/Type)	David P. McAbee		Date April 26, 2007

This collection of information is required by 37 CFR 1.196. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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APR 26 2007

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)

Complete if Known

Application Number	10/040,605
Filing Date	December 28, 2001
First Named Inventor	Harriman, et al.
Examiner Name	Choudhury, Azizul Q
Art Unit	2145
Attorney Docket No.	P13764

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Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fee Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

	<u>Fee (\$)</u>	<u>Small Entity</u>
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20.						

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature	/David P. McAbee/Reg. No. 58,104/	Registration No. (Attorney/Agent) 58,104	Telephone 503-712-4988
Name (Print/Type)	David P. McAbee		Date April 26, 2007

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Attorney's Docket No.: 42P13764

APR 26 2007

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:

Harriman, et al.

Application No.: 10/040,605

Filed: December 28, 2001

For: Communicating Transaction Types
Between Agents in a Computer System
using Packet Headers including Format
and Type Fields

Examiner: Choudhury, Azizul Q

Art Unit: 2145

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed January 26, 2007, applicant respectfully
request that the above-identified application be amended as set forth below.

Attorney Docket #42P13764

1

Application Number:10/040,605